Exhibit B, Attachment I Budget Year 1 (07/01/16 through 06/30/17)

| Position Title | | Annual Salary | FTE % | Annual Cost | |
|---|-------------------------|------------------|------------------------|----------------------|----|
| | \$ | J | | \$ | |
| | \$ \$ \$ \$ \$ \$ \$ \$ | | | \$ | |
| | \$ | | | \$ | |
| | \$ | | | \$ | |
| | \$ | | | \$ | |
| | \$ | | | \$ \$ | |
| | Φ | | | \$ \$ | |
| | Ψ | | Sub | ψ total Personnel | \$ |
| Fringe Benefits (%) | | | Gub | | \$ |
| Tringe Deficites (70) | | Total Person | nel and | Fringe Benefits | \$ |
| Operating Expenses | | Total i erson | ilici alla | i filige Bellelits | Ψ |
| | | | | \$ | |
| General Expenses | | | | | |
| Travel | | | | \$ | |
| Training (Any non-state sponsored training requires pri approval to attend). | | - | nt (PC) | \$ | |
| Space Rent/Lease (FTE X 200 sq. ft. @ /sq. fc | ot | x12 months) | | \$ | |
| Audit Cost | | | | \$ | |
| Conital Function and immediate (CF 000) | | То | tal Operating Expenses | | \$ |
| Capital Expense (major equipment >\$5,000) \$ | | | | | |
| | | | Total C | apital Expense | \$ |
| | | | | лариа: _лропос | • |
| Other Costs | | | | | |
| | | | | Φ | |
| Educational Materials | | | | \$ | |
| Outreach Materials | ۸ (| Cool #* | | \$ \$ | |
| Incentives (# of participants x gift card amount | S) (| Goal #) | То | ್ tal Other Costs | \$ |
| | | | 10 | tai Other Costs | Ф |
| Indirect Costs (% Percentage of Total Person | nel | Costs) | | | \$ |
| | | | | - | |
| | | | | Total Budget | \$ |

*Incentives-gift cards must not be used for Alcohol or Tobacco products. Any unused $\overline{\text{gift cards}}$ must be returned to CDPH upon the end of the Contract term.